

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <div style="text-align: center;">7</div>
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR Mr.</div> <div>FIRST Andrew</div> <div>MI</div> </div> <hr style="border: 0; border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST Nelson</div> <div>SUFFIX</div> </div>		<div style="border: 2px solid black; border-radius: 50%; padding: 10px; margin: 0 auto; width: 150px;"> <div style="text-align: center;"> RECEIVED OCT 2019 CITY SECRETARY'S OFFICE CITY OF BRYAN </div> </div>
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX;</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> 720 N. Rosemary Dr., Bryan TX 77802		
5 CANDIDATE / OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE (979)</div> <div>PHONE NUMBER 450-3434</div> <div>EXTENSION</div> </div>		
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR Mr.</div> <div>FIRST Kenny</div> <div>MI</div> </div> <hr style="border: 0; border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST Lawson</div> <div>SUFFIX</div> </div>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE);</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> 2901 Camelot, Bryan, TX 77802		
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE (979)</div> <div>PHONE NUMBER 220-4050</div> <div>EXTENSION</div> </div>		
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> January 15 </div> <div style="width: 50%;"> <input type="checkbox"/> 30th day before election </div> <div style="width: 50%;"> <input type="checkbox"/> Runoff </div> <div style="width: 50%;"> <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) </div> <div style="width: 50%;"> <input type="checkbox"/> July 15 </div> <div style="width: 50%;"> <input checked="" type="checkbox"/> 8th day before election </div> <div style="width: 50%;"> <input type="checkbox"/> Exceeded \$500 limit </div> <div style="width: 50%;"> <input type="checkbox"/> Final Report (Attach C/OH - FR) </div> </div>		
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year 09 / 27 / 2019 </div> <div>THROUGH</div> <div> Month Day Year 10 / 26 / 2019 </div> </div>		
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month Day Year 11 / 05 / 2019 </div> <div> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </div> </div>		
12 OFFICE	OFFICE HELD (if any) Mayor	13 OFFICE SOUGHT (if known) Mayor	

GO TO PAGE 2

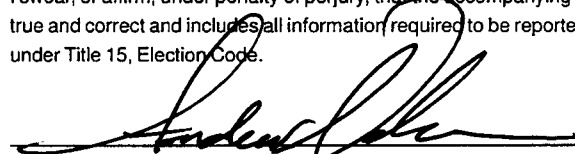
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Andrew Nelson	15 Filer ID (Ethics Commission Filers)				
16 NOTICE FROM POLITICAL COMMITTEE(S) <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <input type="checkbox"/> Additional Pages </div>	<p style="font-size: small;">THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; vertical-align: top;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="width:80%;"> COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS </td> </tr> </table>	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS		
COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION TOTALS	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</td> <td style="width:40%; text-align: right;">\$</td> </tr> <tr> <td>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</td> <td style="text-align: right;">\$ 3,875.00</td> </tr> </table>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,875.00
1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$				
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,875.00				
EXPENDITURE TOTALS	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</td> <td style="width:40%; text-align: right;">\$</td> </tr> <tr> <td>4. TOTAL POLITICAL EXPENDITURES</td> <td style="text-align: right;">\$ 10,077.43</td> </tr> </table>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	4. TOTAL POLITICAL EXPENDITURES	\$ 10,077.43
3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$				
4. TOTAL POLITICAL EXPENDITURES	\$ 10,077.43				
CONTRIBUTION BALANCE	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</td> <td style="width:40%; text-align: right;">\$ 26,486.38</td> </tr> </table>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 26,486.38		
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 26,486.38				
OUTSTANDING LOAN TOTALS	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</td> <td style="width:40%; text-align: right;">\$ 10,100.00</td> </tr> </table>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,100.00		
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,100.00				

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Andrew Nelson, this the 25th day of October, 20 19, to certify which, witness my hand and seal of office.

Mary K Stratta Mary K Stratta City Secretary
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Andrew Nelson		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,875.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 10,770.43
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 3**2** FILER NAME

Andrew Nelson

3 Filer ID (Ethics Commission Filers)**4** Date

10/17/19

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Steve Smith

7 Amount of contribution (\$)

\$150.00

6 Contributor address; City; State; Zip Code

3840 Cedar Ridge Dr, College Station, TX 77845

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

10/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Don Lewis

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

1511 Texas Ave S #116, College Station, TX 77840

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael & Sandra Schaefer

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

3622 Chaco Canyon Dr, College Station, TX 77845

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Buppy Simank

Amount of contribution (\$)

\$ 500.00

Contributor address; City; State; Zip Code

4018 Green Valley Dr, Bryan, TX 77802

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 3**2** FILER NAME

Andrew Nelson

3 Filer ID (Ethics Commission Filers)**4** Date

10/22/19

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Carl Senter

7 Amount of contribution (\$)

\$200.00

6 Contributor address;

City; State; Zip Code

718 N Rosemary Dr, Bryan, TX 77802

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

10/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clint Cooper

Amount of contribution (\$)

\$1,000.00

Contributor address;

City; State; Zip Code

P.O. Box 9444, College Station, TX 77842

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Clark

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

3828 S College Ave, Bryan, TX 77801

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bradley Hurt

Amount of contribution (\$)

\$ 50.00

Contributor address;

City; State; Zip Code

3219 Pinyon Creek Dr, Bryan, TX 77807

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 3**2** FILER NAME**Andrew Nelson****3** Filer ID (Ethics Commission Filers)**4** Date**10/22/19****5** Full name of contributor☐ out-of-state PAC (ID#: _____)**Victor Drozd****6** Contributor address;

City; State; Zip Code

4710 Westminster Dr, Bryan, TX 77802**7** Amount of contribution (\$)**\$100.00****8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

10/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)**Kathy Nelson**

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)**Jack Culpepper**

Contributor address;

City; State; Zip Code

1700 George Bush Dr E Ste 240, College Station, TX 77840

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)**Mark Humphrey**

Contributor address;

City; State; Zip Code

5532 Straub Rd, College Station, TX 77845

Amount of contribution (\$)

\$ 500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 1		2 FILER NAME Andrew Nelson		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2019		5 Payee name Farrell Gjesdal			
6 Amount (\$) \$9,698.00		7 Payee address; City; State; Zip Code 1808 Bee Creek Dr, College Station, TX 77840			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/15/2019		Payee name Reuben Marin			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 1006 Acheson, Bryan, TX 77803			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Candidate Contribution		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/23/2019		Payee name PayPal			
Amount (\$) \$72.43		Payee address; City; State; Zip Code 2211 North First Street, San Jose, California 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED